

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: Marco FILICORI  
Title: UNITARY COMBINATIONS  
OF FSH AND hCG  
Appl. No.: 10/559,610  
Filing Date: 1/31/2006  
Examiner: Regina M. Deberry  
Art Unit: 1647  
Confirmation Number: 1532

**INFORMATION DISCLOSURE STATEMENT**  
**UNDER 37 CFR §1.56**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Submitted herewith on Form PTO/SB/08 is a listing of documents known to Applicant in order to comply with Applicant's duty of disclosure pursuant to 37 CFR §1.56.

A copy of each non-U.S. patent document and each non-patent document is being submitted to comply with the provisions of 37 CFR §1.97 and §1.98.

The submission of any document herewith is not intended as an admission that such document constitutes prior art against the claims of the present application or that such document is considered material to patentability as defined in 37 CFR §1.56(b). Applicant does not waive any rights to take any action which would be appropriate to antedate or otherwise remove as a competent reference any document which is determined to be a *prima facie* art reference against the claims of the present application.

**TIMING OF THE DISCLOSURE**

The listed documents are being submitted in compliance with 37 CFR §1.97(c), before the mailing date of any of a final action under 37 CFR §1.113, a notice of allowance under 37 CFR §1.311, or an action that otherwise closes prosecution in the application.

**RELEVANCE OF EACH DOCUMENT**

The listed documents are Office Actions which issued in co-pending applications already of record.

Applicant respectfully requests that each listed document be considered by the Examiner and be made of record in the present application and that an initialed copy of Form PTO/SB/08 be returned in accordance with MPEP §609.

**FEE**

A credit card payment form in the amount of \$180.00 is enclosed to cover the fee associated with an information disclosure statement under 37 CFR §1.97(c).

The Commissioner is hereby authorized to charge any additional fees which may be required regarding this submission under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by the credit card payment form being unsigned, providing incorrect information resulting in a rejected credit card transaction, or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Respectfully submitted,

Date December 9, 2010

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